

(Column 1)	(Column 2)
1	2
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99	100

IPLE DEPENDENT OLAIM PRESENT (SY OFR 1,160))

OTHER THAN SMALL ENTITY	
RATE (\$)	FEE (\$)
X	
X	
TOTAL	

PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.160)

OTHER THAN SMALL ENTITY	
RATE (\$)	ADDITIONAL FEE (\$)
OR X.50 =	/
OR X.200 =	
OR 360	
OR TOTAL ADD'L FEE	/

PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.160))

	RATE (\$)	ADDITIONAL FEE (\$)
OR	X	=
OR	X	=
OR		
OR	TOTAL	ADD'L FEE

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.